

clients, many of whom are bedridden.

The observation of a high incidence of hepatocellular carcinoma among HBsAg carriers in a US population free of exposure to other hepatocarcinogens (such as aflatoxin, tobacco smoke, ethanol, vinyl chloride, hepatic parasites) greatly strengthens the etiologic link between persistent hepatitis B infection and hepatocellular carcinoma. Mental retardation per se is not known to predispose one to this disorder, other than by exposing a client to hepatitis B infection in institutions.

There is no effective cure for the HBsAg carrier state, and the carriers—about 200 million worldwide—are at a 0.3% to 0.7% annual risk of hepatocellular carcinoma developing.¹⁰ Primary prevention should be attempted by vaccination for hepatitis B of all susceptible high-risk groups. Secondary prevention could be achieved by early diagnosis of this disease with semiannual α -fetoprotein screening of all HBsAg carriers and follow-up of all persons with abnormal results with serial ultrasonography. Both of these forms of prevention are currently being undertaken in the California institutions.

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Tuberculosis

BEWARE OF TUBERCULOSIS. Tuberculosis is present; it has never decreased in frequency; it has only decreased in mortality and morbidity because we have antituberculosis drugs.

I would hate to tell you how many times we see tuberculosis—active tuberculosis—at autopsy and in a patient who has been in the hospital for six months, being treated with any number of mega antibiotics—every antibiotic you can think of, except the one for tuberculosis.

When I teach residents and medical students about diseases in the elderly, I tell them, “You’ve got to be careful of two things and both of them begin with T—tuberculosis and tumor.” Never forget that tuberculosis is not an uncommon disease in the elderly. Never forget that the tuberculin test may be negative in those of increasing age and that 40% of people who have tuberculosis have negative chest x-ray films. So tuberculosis is an absolutely necessary consideration in every elderly patient!

—ALBERT S. KLAINER, MD

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